2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000028599

Entity Name: SUNNYCOAST DERMATOLOGY, INC.

FILED Jan 24, 2008 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

1850 43RD AVENUE SUITES C (4 & 5) VERO BEACH, FL 32960

Current Mailing Address: New Mailing Address:

1850 43 AVE, STE C(4&5)

VERO BEACH, FL 32960

1850 43 RD AVENUE

SUITES C (4 & 5)

VERO BEACH, FL 32960

FEI Number: 65-1088005 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RUDOLPH, THEODOR M 5354 SE HORSESHOE POINT RD STUART, FL 34997 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 MD
 (X) Change () Addition

 Name:
 RUDOLPH, THEODOR M
 Name:
 RUDOLPH, THEODOR M

 Address:
 5354 SE HORSESHOE POINT RD
 Address:
 5354 SE HORSESHOE POINT RD

City-St-Zip: STUART, FL 34997 City-St-Zip: STUART, FL 34997

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THEODOR RUDOLPH MD 01/24/2008

Electronic Signature of Signing Officer or Director

Date